

# North Carolina Medicaid Bulletin

*An Information Service of the Division of Medical Assistance*

*Published by EDS, fiscal agent for the North Carolina Medicaid Program*

**Number 1**

**January 1997**

## **Attention: All Providers**

### **Holiday observance**

The Division of Medical Assistance (DMA) and EDS will be closed on Wednesday, January 1, 1997, in observance of New Year's Day.

DMA and EDS will also be closed on Monday, January 20, 1997, in observance of Martin Luther King, Jr. Day.

### **EDS**

**1-800-688-6696 or 919-851-8888**

## **Attention: All Providers**

### **1997 Medicaid Fair**

The 1997 North Carolina Medicaid Fair is scheduled for Tuesday, May 20, 1997, at the Four Seasons in Greensboro, North Carolina.

A special bulletin will be mailed in January that will include class information, booth information, and a registration form. Please watch for this important publication.

### **EDS**

**1-800-688-6696 or 919-851-8888**

## **Attention: All Physicians**

### **Doxil: Dosage correction**

The December bulletin inadvertently listed the dosage unit for Doxil, code W5167, as 10 mg. The correct dosage unit is 10ml. Please note this correction.

## **Attention: DME Providers**

### **Coverage of therapeutic ventilator**

Effective with dates of service beginning January 1, 1997, HCPCS code E0453, "therapeutic ventilator; suitable for use 12 hours or less per day," will be covered. This item will be placed in the Frequently Served category of the DME Fee Schedule. Prior approval will be required. Medical necessity must be documented by the physician for patients who require non-continuous ventilatory assistance and have the following diagnoses:

- Chronic obstructive airway diseases such as emphysema and cystic fibrosis
- Neuromuscular diseases such as muscular dystrophy, multiple sclerosis, and amyotrophic lateral sclerosis
- Hypoventilation syndrome

The maximum reimbursement rate for rental is \$595.84 per month. This fee covers all supplies required by the patient for use with the ventilator.

**Melody B. Yeargan, P.T., Medical Policy**

**DMA, 919-733-9434**

***Providers are responsible for informing their billing agency of information in this bulletin.***

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**Attention: All Providers****Supplemental Security Income Medicaid recipients with incorrect Medicare indicators**

All Supplemental Security Income (SSI) recipients in North Carolina are automatically eligible for Medicaid benefits. These individuals are not required to apply for Medicaid benefits at the county department of social services. Their Medicaid eligibility records are created from the Social Security Administration's SSI data files.

Incorrect Medicare information appears on some SSI Medicaid recipients' Medicaid identification (MID) cards due to inaccurate data on SSI files. If the recipient's MID card indicates Medicare coverage, ask to see his/her Medicare card. Hospitals may verify Medicare benefits by on-line inquiry to the Medicare Common Working File (CWF). If Medicare benefits are available, file claims for Medicare covered services to Medicare as usual.

If the recipient does not have a Medicare card, states he is not enrolled in Medicare, and is under age 65, the Medicare indicators on the Medicaid card probably are incorrect. Claims other than inpatient hospital services will not be affected by the incorrect Medicare indicators and should be filed directly to EDS.

Claims for inpatient hospital services will be denied if incorrect Medicare indicators appear on the Medicaid card. To prevent denial, submit a hard-copy claim to DMA for special handling. Send the UB-92 claim form and a copy of the CWF, if available, to the Claims Analysis Unit, DMA, P.O. Box 29529, Raleigh, NC 27626-0529.

The Division of Medical Assistance (DMA) is working with the Social Security Administration to resolve this problem.

**Claims Analysis Unit  
DMA, 919-733-4600**

**Attention: Personal Care Service and CAP/DA Providers****Documenting aide visits**

Program Integrity has identified a problem with providers not having proper documentation of aide visits. Specific types of documentation errors included:

- Failure to enter the time work began or ended
- Failure of the aide to sign the log to certify that the aide performed the recorded tasks at the dates and times listed
- Failure of the appropriate party to sign the log to certify that the aide performed the tasks at the dates and times listed
- Tasks did not agree with the plan of care

Providers must keep a record of services provided for each recipient. The following requirements are listed in the Community Care Manual:

- At the end of each visit, the aide enters the date of the visit, the time work began, the time work ended, and the tasks performed
- The aide signs and dates the log to certify that the aide performed the recorded tasks at the dates and times listed
- The appropriate party signs and dates the log to certify that the tasks were performed satisfactorily for the times listed

For complete policy guidelines on documenting services, please refer to Section 6.11 in the Community Care Manual for PCS requirements and Section 12.11 for CAP/DA requirements. Failure to provide proper documentation or follow Medicaid policy will result in recoupment of overpayments.

**EDS  
1-800-688-6696 or 919-851-8888**

**Attention: Physicians, Physician Extenders, and other Practitioners**

**Principles of medical record documentation**

As a condition of participation, Medicaid providers are required to keep records necessary to disclose the extent of services rendered to recipients and billed to the program. Records must be retained for a period of not less than five years from the date of service unless a longer retention period is required by applicable federal or state law, regulations, or agreements. Copies of records must be furnished upon request. Record documentation is used by DMA to determine medical necessity and verify services were billed correctly.

The following principles of documentation are being adopted from Medicare policy:

1. The medical record must be complete and legible.
2. The documentation of each patient encounter must include the date and reason for the encounter as well as relevant history, physical examination findings, and prior diagnostic test results; assessment; clinical impression or diagnosis; services delivered; plan for care including drugs and dosage prescribed or administered; and legible signature of the observer.
3. Past and present diagnoses and health risk factors must be identified and accessible to the treating and/or consulting physician.
4. The rationale for diagnostic tests and other ancillary services must be documented or apparent in the medical record.
5. The patient's progress, including response to and change in treatment must be documented. Reasons for diagnostic revision must be documented.
6. The documentation must support the intensity of the patient evaluation and/or the treatment, including thought processes and the complexity of medical decision making.
7. The CPT/ICD-9 codes reported on the health insurance claim form or billing statement must be supported by the documentation in the medical record.

**Anne Rogers, Carolina ACCESS**  
**919-715-5417**

or

**Carleen Massey, Program Integrity**  
**DMA, 919-715-4847**

**Attention: General Hospitals with Psychiatric Units Subject to Review by First Mental Health**

**Prior Authorization for child and adolescent admissions**

There has been a change in the procedure for obtaining prior authorization (PA) numbers from First Mental Health (FMH) for psychiatric admissions of the under 21 age group. When a decision is made by FMH to approve or deny an admission, the telephone contact will be informed of that decision. However, prior approval numbers for approved admissions are no longer being issued during the telephone review. The PA numbers are computer generated at FMH and faxed to each hospital within one working day of the decision. A hospital contact person has been identified to receive this information.

There are no changes in the process for sending approval and denial letters.

Psychiatric hospitals must submit accurate certificates of need (CONs) for admissions before a PA number can be issued.

Carolina Alternative recipients are not subject to FMH review. Their admissions must be approved by the appropriate area mental health programs.

**Connie Bryant, R.N.,**  
**FMH, 1-800-598-6462**

**Attention: CAP/DA, CAP/AIDS, and CAP-MR/DD Providers**

**Rate increase for Personal Emergency Response System**

Effective with dates of service beginning January 1, 1997, the maximum reimbursement rate for the Personal Emergency Response System (PERS) will be increased to \$26.82. The codes for each CAP program appear below:

Program	Procedure Code
CAP/DA	W8127
CAP/AIDS	W8171
CAP-MR/DD	W8162

Providers are reminded to bill their usual and customary rate and not the Medicaid maximum.

**Richard Young, Financial Operations**  
**DMA, 919-733-6784**

**Attention: Physicians****Coverage of Extracorporeal Membrane Oxygenation**

Effective with dates of service beginning January 1, 1997, the North Carolina Medicaid Program will reimburse for Extracorporeal Membrane Oxygenation (ECMO).

The codes are:

<b>CPT Code</b>	<b>Description</b>
33960	Prolonged extracorporeal circulation for cardiopulmonary insufficiency; initial 24 hours
33961	Each additional 24 hours
36822	Insertion of Cannula(s) for prolonged extracorporeal circulation for cardiopulmonary insufficiency (ECMO) (separate procedure)

The service will be limited to three days of therapy with documentation required for subsequent days beyond the three days. Critical care services will not be reimbursed to the same provider for the same date of service as the ECMO.

**EDS**

**1-800-688-6696 or 919-851-8888**

**Attention: Dialysis Treatment Facility Providers****Epogen injections - billing reminder**

Dialysis treatment facility providers are reminded of the following when filing Medicaid for Epogen (EPO) on the UB-92 claim:

- Bill Revenue Code 634 in form locator 42
- Enter description in form locator 43
- Leave form locator 44 blank (The HCPCS code is not needed for this revenue code for Medicaid billings.)
- Enter units in form locator 46 (1000U = 1 unit)
- Enter the total charge in form locator 47

Refer to the billing example below:

42 Rev Code	43 Description	44 HCPCS/Rates	45 Serv Date	46 Serv Units	47 Total Charges	48 Noncovered Charges
634	EPO 9000U		041596	9	99.00	

**EDS**

**1-800-688-6696 or 919-851-8888**

## **Attention: Durable Medical Equipment (DME) Providers**

### **Seminars**

Durable Medical Equipment (DME) seminars will be held in March 1997. The February Medicaid Bulletin will have the registration form for the seminars and a list of site locations. Please suggest topics and issues you would like addressed at the seminars in the space provided below and return to:

DME Provider Representative  
EDS  
P.O. Box 300009  
Raleigh, NC 27622

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## **Attention: All Providers of Well Child Care (Excluding Health Departments)**

### **Seminars**

Health Check is Medicaid's well child care program for recipients birth through age 20. These seminars will be held in March 1997. The February Medicaid Bulletin will have the registration form for the seminars and a list of site locations. Please suggest topics you would like addressed at the seminars. List topics and issues below and return to:

Health Check Provider Representative  
EDS  
P.O. Box 300009  
Raleigh, NC 27622

## Attention: Dialysis Providers

### Seminar schedule

Seminars for Dialysis providers will be held in February 1997. Guidelines and billing instructions for facility and physician dialysis providers will be the primary focus of this seminar.

Please select the most convenient site and return the completed registration form to EDS as soon as possible. Seminars begin at 10:00 a.m. and end at 1:00 p.m. Providers are encouraged to arrive by 9:45 a.m. to complete registration. Preregistration is strongly recommended.

Directions are available on page 9 of this bulletin.

#### **Tuesday, February 4, 1997**

Holiday Inn  
4903 Market Street  
Wilmington, NC

#### **Monday, February 10, 1997**

Moses Cone Hospital  
1200 N. Elm Street  
Greensboro, NC  
Education Center

#### **Tuesday, February 11, 1997**

Catawba Valley Tech.  
Highway 64-70  
Hickory, NC  
Auditorium

#### **Tuesday, February 18, 1997**

Wake Medical Center  
MEI Conference Center  
3000 New Bern Avenue  
Raleigh, NC  
(Park at Wakefield Shopping Center)

(cut and return registration form only)

### Dialysis Provider Seminar Registration Form

(No Fee)

Provider Name \_\_\_\_\_ Provider Number \_\_\_\_\_

Address \_\_\_\_\_ Contact Person \_\_\_\_\_

City, Zip Code \_\_\_\_\_ County \_\_\_\_\_

Telephone Number \_\_\_\_\_ Date \_\_\_\_\_

\_\_\_\_\_ persons will attend the seminar at \_\_\_\_\_ on \_\_\_\_\_  
(location) (date)

Return to: Provider Relations  
EDS  
P.O. Box 300009  
Raleigh, NC 27622

**Attention: All Providers****Medicaid phone numbers**

In an effort to assist all billing personnel, EDS and DMA are publishing the following phone numbers. Please detach these numbers from the bulletin and post in your office.

<b>Topic/Reason for call</b>	<b>Contact Source</b>	<b>Telephone Number</b>
Billing issues Carolina ACCESS denials Coverage issues Denials (Other than eligibility denials) Forms (information and orders) Policy questions	EDS Provider Services	1-800-688-6696 or 919-851-8888 Menu option 3
Carolina ACCESS questions (other than denials) Carolina ACCESS Emergency Authorization Number requests (PCP's only)	Carolina ACCESS	1-800-228-8142 or 919-715-5417
Checkwrite information Claim Status Eligibility information, current day Procedure code pricing	Voice Inquiry System	1-800-723-4337
Eligibility Denials	DMA Claims Analysis	919-733-4600
Provider Enrollment	DMA Provider Enrollment (i.e., New enrollments) EDS Provider Enrollment (i.e., Medicare crossovers)	919-733-2130 1-800-688-6696 or 919-851-8888
Fee Schedules	DMA Financial Section	919-733-6784
Fraud and Abuse	DMA Program Integrity	919-733-6681
Third Party Insurance Code Book	DMA Third Party Recovery	919-733-6294
Electronic Claims Submission	ECS	1-800-688-6696 or 919-851-8888 Menu option 1
Prior Approval	PA	1-800-688-6696 or 919-851-8888 Menu option 2
Drug Utilization Review	DMA Program Integrity	919-733-3590
First Mental Health Questions	First Mental Health	1-800-598-6462
Pre-certification (Pre -admission)	Medical Review of North Carolina (MRNC)	1-800-722-6762
Managed Care	Mecklenburg Managed Care	919-715-5417
Recipient questions (Phone number for recipients to call)	Care Line	1-800-662-7030

Other important phone numbers:

Electronic Transmissions: 919-851-1023 (Asynchronous) PC to PC  
919-233-6839 (Bisynchronous) Mainframe to Mainframe

*Note: There are 12 lines set up for async and three lines set up for bisync.*

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**Attention: All Providers**

**Directions to the Dialysis seminars**

The registration form for this workshop is on page 6 of this bulletin.

**Holiday Inn, Wilmington**

**Tuesday, February 4, 1997**

I-40 East into Wilmington to Highway 17 - just off of I-40. Turn right onto Market Street and Holiday Inn is located on the right.

**Moses Cone Hospital Education Center, Greensboro**

**Monday, February 10, 1997**

From I-40 West to Rock Creek Dairy Road and turn right ( From I-40 East left and cross the bridge). Go to 1st stoplight and turn left onto Wendover Road which is Highway 70. Follow Hospital signs to Elm Street, turn left onto Elm Street, and hospital is on the right.

**Catawba Valley Technical College, Hickory**

**Tuesday, February 11, 1997**

Take I-40 to exit 125 and go approximately 1/2 mile to Highway 70. Head East on Highway 70 and College is approximately 4 miles on the right.

**Wake Medical Center, MEI Conference Center, Raleigh**

**Tuesday, February 18, 1997**

Take the I-440 Raleigh beltline to New Bern Avenue, Exit 13A. Go toward Wake Medical Center on New Bern Avenue and at the stoplight at Sunnybrook Road, turn left. At Wakefield Shopping Center, turn left and park in the shopping center parking lot. Parking is free. Walk back to New Bern Avenue up the sidewalk in front of the Wake County Department of Health and stay on the sidewalk until it leads you to the Medical Education Institute. Enter the building at the far left Conference Center Entrance and follow the signs to your classroom.

## Bulletin article index from July 1996 through December 1996

The following list contains the titles of bulletin articles and bulletins by provider type that have appeared in the previous Medicaid Provider Bulletins from July 1996 through December 1996.

### Adult Care Home Providers

Enhanced Adult Care Home Personal Care (ACH/PC) and Adult Care Home Case Management Services (ACH/CMS), August 1996 Special Bulletin

Increase in payment rate for transportation, pg. 1, 10/96

### All Providers

1996 North Carolina Medicaid Fair, pg. 1, 10/96

Ambulance transportation of pregnant women, pg. 5, 7/96

Automated multichannel laboratory tests update, pg. 8, 7/96

Billing pathology services, pg. 3, 8/96; pg. 6, 12/96

Billing radiation treatment delivery and management codes- new policy, pg. 5, 9/96

Carolina ACCESS grace period change, pg. 2, 12/96

Claims filing/reimbursement - Medicaid overpayments, pg. 2, 11/96

Correction - EDS toll free phone number, pg. 1, 8/96

EDI update, pg. 4, 9/96; pg. 5, 8/96; pg. 6, 7/96; pg. 13, 12/96

Fee schedule, reimbursement plans and Medicaid bulletin subscription, pg. 10, 7/96; pg. 9, 12/96

Health Care Connection (Formerly Mecklenburg project), pg. 5, 10/96; pg. 14, 12/96

Holiday observance, pg. 1, 12/96; pg. 1, 11/96; pg. 1, 10/96; pg. 1, 8/96

Managed Care Unit layout, pg. 6, 10/96

Medicaid ID Card - sample, pg. 15, 12/96

Medicare/Medicaid crossovers - billing reminder, pg. 9, 9/96

On-line eligibility verification, pg. 6, 7/96

Reminder 1996 Medicaid Fair, pg. 1, 8/96

Revised listing of CPT codes billable by Certified Registered Nurse Anesthetists, pg. 9, 7/96

Special W-9 form, pg. 5, 11/96

Special W-9 instructions, pg. 4, 11/96

### Ambulance

Ambulance software update, pg. 1, 7/96

Ambulance transportation of pregnant women, pg. 5, 7/96

### Ambulatory Surgical Centers

New coverage for insertion of Vitrasert Ganciclovir Implant, pg. 8, 12/96

### Anesthesiologists

Anesthesia consultations, pg. 2, 7/96

### Area MH/DD/SA Programs

Home Health physical therapy and speech therapy at ADAP Centers, pg. 3, 7/96; pg. 2, 7/96; pg. 1, 9/96

### CAP Providers

Reimbursement rate increases, pg. 3, 9/96

### Carolina ACCESS

Carolina ACCESS update to our provider family, pg. 4, 10/96

Emergency room policy, pg. 3, 7/96

New county representatives, pg. 1, 9/96

Primary Care Providers (PCP) - Clarification of House Bill 773 - "Direct Access to Obstetrician - Gynecologists", pg. 3, 7/96

Standards for appointment availability, pg. 4, 7/96

### Certified Nurse Midwives

Certified Nurse Midwives procedure codes, pg. 1, 8/96

### Chiropractic Providers

X-rays - new policy, pg. 3, 10/96

### CRNA Providers

Revised listing of CPT codes billable by Certified Registered Nurse Anesthetists, pg. 9, 7/96

### Dental Providers

Attending provider number requirement, pg. 3, 10/96

General anesthesia and intravenous sedation defined, pg. 2, 12/96

Radiographs taken during endodontic therapy, pg. 13, 12/96

Referrals, pg. 3, 12/96

Restorations for Orthodontic candidates, pg. 1, 11/96

### Dialysis Providers

Seminars, pg. 8, 12/96

Texas Blue Cross Blue Shield crossover claims, pg. 9, 7/96

## **DME Providers**

- Changes in codes for solutions, pg. 3, 8/96
- Changes in lifetime expectancies for wheelchairs, pg. 1, 11/96
- Completion of Certificate of Medical Necessity and Prior approval form, pg. 3, 12/96
- Coverage of insulin pump and supplies, pg. 4, 12/96

## **DSS**

- Ambulance transportation of pregnant women, pg. 5, 7/96

## **ECS Providers**

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- NECS software, pg. 1, 12/96

## **Federally Qualified Health Centers**

- Billing for well child care visits, pg. 2, 7/96; pg. 2, 8/96

## **Health Check Providers**

- Billing for well child care visits, pg. 2, 7/96; pg. 2, 8/96
- Clarification regarding coverage of Hepatitis B Vaccine through the VFC and Medicaid programs for children "at risk", pg. 1, 7/96

## **Home Health Providers**

- Disposable diapers for young children, pg. 3, 12/96
- Home Health physical therapy and speech therapy at ADAP Centers, pg. 3, 7/96; pg. 2, 8/96; pg. 1, 9/96

## **Home Infusion Therapy (HIT) Providers**

- Change in unit of service for Registered Nurse Monitoring of Amphotericin B - Effective October 1, 1996; pg. 2, 9/96

## **Hospice Providers**

- Directions to the Hospice seminars, pg. 12, 12/96
- Hospice rates, 5, 12/96
- Hospice UB-92 claim form instructions, November 1996 Special Bulletin
- Seminars, pg. 3, 11/96
- Seminar schedule, pg. 11, 12/96

## **Hospital Providers**

- Lower level of care and swing bed rates, pg. 2, 11/96
- Lower level of care and swing bed rates - revision, pg. 1, 12/96
- New coverage for insertion of Vitrasert Ganciclovir Implant, pg. 8, 12/96
- Seminars, pg. 11, 9/96
- Seminar schedule, pg. 7, 10/96

## **Mental Health**

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- Home Health physical therapy and speech therapy at ADAP Centers, pg. 3, 7/96

## **Nursing Facility Providers**

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- Seminars, pg. 12, 7/96
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## **OB/GYN Providers**

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## **Personal Care Providers**

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## **Primary Care Providers**

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- Individual visits, pg. 12, 7/96

## **Radiology Providers**

- Radiology type of treatment, pg. 8, 9/96

## **Rural Health Providers**

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## **Sterilization Providers**

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### Checkwrite Schedule

January 7, 1997  
January 14, 1997  
January 23, 1997

February 4, 1997  
February 11, 1997  
February 20, 1997

March 4, 1997  
March 11, 1997  
March 18, 1997  
March 27, 1997

### Electronic Cut-Off Schedule \*

January 3, 1997  
January 10, 1997  
January 17, 1997

January 31, 1997  
February 7, 1997  
February 14, 1997

February 28, 1997  
March 7, 1997  
March 14, 1997  
March 21, 1997

\* *Electronic claims must be transmitted and completed by 5:00 p.m. on the cut-off date to be included in the next checkwrite. Any claims transmitted after 5:00 p.m. will be processed on the second checkwrite following the transmission date.*

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Barbara D. Matula, Director  
Division of Medical Assistance  
Department of Human Resources

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James R. Clayton  
Executive Director  
EDS

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